

NAL TRANSFER REQUEST FOR S.N.

09/8045-20

DATE: <u>30 MAY 01</u>	FROM: <u>JOHN O'LEARY</u> (print name)
FORWARD TO:	
A. Art Unit: <u>2634</u>	REASON(S):
B. Class: <u>375</u>	A. You had Parent <input type="checkbox"/>
C Subclass: <u>222</u>	B. See Title <input type="checkbox"/>
	C. See Abstract <input type="checkbox"/>
	D. See Claim(s): <u>all</u>

FURTHER EXPLANATION IF NEEDED:

claims directed to a DMT transmitter

DATE: _____	FROM: _____ (print name)
FORWARD TO:	
A. Art Unit: _____	REASON(S):
B. Class: _____	A. You had Parent <input type="checkbox"/>
C Subclass: _____	B. See Title <input type="checkbox"/>
	C. See Abstract <input type="checkbox"/>
	D. See Claim(s): _____

FURTHER EXPLANATION IF NEEDED:

DATE: _____	FROM: _____ (print name)
FORWARD TO CLASSIFIER	
REASON(S):	
A. You had Parent	<input type="checkbox"/>
B. See Title	<input type="checkbox"/>
C. See Abstract	<input type="checkbox"/>
D. See Claim(s): _____	

FURTHER EXPLANATION IF NEEDED:**DISPOSITION BY 2700 CLASSIFICATION**

DATE: _____	CLASSIFIER: _____
FORWARD TO:	
A. Art Unit: _____	REASON(S):
B. Class: _____	A. You had Parent <input type="checkbox"/>
C Subclass: _____	B. See Title <input type="checkbox"/>
	C. See Abstract <input type="checkbox"/>
	D. See Claim(s): _____

FURTHER EXPLANATION IF NEEDED: